

## Vascular FRSC exam resources and tips

As there are limited resources available and no official vascular FRCS question bank, these tips have been put together by some past and present members of the Rouleaux Club Executive Committee to help members prepare for the vascular FRCS. The exam changes from year to year, so they can only comment on the exam they have sat themselves. In addition, revision styles vary from person to person, so these tips are personal opinions and advice only, and not an official document from the Vascular FRCS exam board. We hope this gives you some insight into the exam and helps you prepare. Good luck!

### General resources & tips:

**ESVS guidelines-** Invaluable. Gives you all the evidence for decision making. There are currently 14 guidelines on key vascular surgery topics, with more to be published soon. Download from EJVES website <https://www.ejves.com/content/guidelines>. There is also a mobile app.

**Textbook-** Find one main textbook, options include the following. No need to use Rutherford's, which is too detailed for what is required for this exam.

1. Oxford Textbook of Vascular Surgery, Edited by Matthew M Thompson. Some chapters like hyperhydrosis and TOS are excellent and contain all the information you need for exam. 20% discount for Vascular Society members, discount code on online member profile.
2. Vascular and Endovascular Surgery: A Companion to Specialist Surgical Practice, Edited by Ian Loftus and Robert J Hinchliffe. This is not detailed enough for sole use for Part 1, but can be used together with another textbook. It can be used as the main textbook for Part 2. (Overlaps with Postgraduate Vascular Surgery so use one of the two).
3. Postgraduate Vascular Surgery: A Candidate's Guide To The FRCS And Board Exams by Vish Bhattacharya and Gerard Stansby. (Overlaps with Companion series so use one of the two).
4. Extra- Rare Vascular Disorders: a practical guide for the vascular specialist- Useful for conditions rare in clinical practice but which often feature in the exam.

**Papers-** Need to know the 20 papers. List on ISCP. The list changes every few months/years, so make sure you have the up-to-date list before each part of the exam. <https://www.iscp.ac.uk/media/1332/vascular-frcs-papers.pdf>. Oxford Vascular Collaterals does an in-depth journal club style review of the 20 papers which is excellent. Also need to know the landmark papers such as EVAR 1 and 2, IMPROVE, UK small aneurysm trial, BASIL, carotid trials etc. Use evidence from the papers to base your decision-making on. You don't need to know stats and numerical details from papers in detail, just the main outcomes to base your decision making on.

**Online resources-** Very useful for topic overview, and great as a break from reading.

- ASPIRE digital- via Vascular Society website for members (membership fee)
- Oxford Vascular Collaterals <https://www.theoxfordvascularcollaterals.com/> Need to be a member (free) to access videos. Excellent resource, not just for the paper synopsis but also broader understanding of certain topics, especially ones like vascular paediatrics.
- BSET webinar series <https://bset.co.uk/education> (free via website)
- Audible bleeding <https://www.audiblebleeding.com/> Podcasts and exam prep podcasts on vascular surgery topics with accompanying notes (free via website)

**MDT-** Start paying attention in MDT, presenting cases, following the imaging in detail during MDT discussions, and understanding the rationale for decision making.

**Imaging-** CXR for cervical rib, single slices and short clips of CTA for AAA, lower limb, carotid etc, carotid and lower limb duplex.

**Important topics to cover-** Radiation safety, hyperhidrosis, thoracic outlet syndrome, statistics such as calculating NNT, popliteal entrapment, popliteal aneurysms, amputation flaps, vasculitis, vascular paediatrics.

**Exam group/study buddies-** An exam group or study buddy is helpful to keep each other motivated, ask questions, share information, practice talking through answers for part 2. This is easy to organise with Zoom/Teams.

**Decision making/management-** Focus on decision making (eg: amputation vs palliation for ALI, BMT vs CAS vs CEA for carotid disease, endoleak management, EVAR vs open for AAA), clinical judgement and handling colleagues scenarios that you can't learn off a textbook.

## **Part 1:**

**Question banks-** Useful to practice exam technique and time management.

1. eFRCS and Pastest general surgery FRSC question banks- eFRCS probably more relevant for this exam. There is a mobile app version that can be used on the go/while waiting for theatre cases to start etc. Suggest doing the emergency general surgery, trauma and vascular surgery questions, able to filter it accordingly. Do not bother doing the speciality questions such as upper GI, cancer, endocrine etc as they are not relevant to this exam. The vascular surgery questions are fairly basic however. You can pay for 3 months. Some questions have come up in the Part 1 exam.
2. VESAP American Vascular Surgery exam question bank via SVS. While the style and type of questions is not particularly reflective of the UK exam, it is very useful to have the chance to practice vascular surgery questions, exam technique and timings. It is expensive but if you join together with a few others then it is really worth it. Sign up using only one person's details and split the cost, and multiple people can login simultaneously.

**General surgery-** In Part 1 only. The amount of emergency and general surgery and trauma questions vary from year to year.

- If you want a textbook for revision can use either Core Topics in General & Emergency Surgery: A Companion to Specialist Surgical Practice or Behind the Knife: ABSITE Podcast Companion (Good for some general surgery and critical care topics. Laid out in bullet points so good way to get info quickly / flick through)
- eFRCS and Pastest question banks

### **Exam technique-**

- Go with your gut instinct, they are not trying to trip you up on purpose. Exam technique and time management is key. It is a rushed exam, designed to put you under pressure. Not negatively marked so make sure you answer all the questions. If you are unsure of an answer go with your best guess, flag it, and at the end of the exam you can review flagged questions if you have time. Do answer the questions in first place however instead of leaving any blank, in order to avoid running short of time and missing questions.
- A very clinical exam with not much basic science or anatomy, lots of imaging, some questions on operative technique and several questions on rare vascular conditions.

## **Part 2:**

- Papers- Know the 20 papers from ISCP website as you will get one for your academic station. The paper is available on the table, but you don't really have much time to look anything up. The academic station is a clinical scenario based around the paper.
- Evidence-based practice- You need to include evidence from the 20 papers, other landmark trials and the ESVS guidelines to justify your decision making in all stations, not just in the academic station.
- Practice!
  - Get different bosses & senior colleagues past and present, very senior (similar to examiners) and more junior (recently done the exam) to do zoom or in-person sessions to discuss cases and imaging. Very useful to have different people question you, to get used to different examining styles and pace.
  - Practice talking through answers out loud
  - Practice structuring your answers
- A fairly rushed exam with long breaks between stations
- No general surgery in part 2
- ASPIRE 7 course is very useful